

## POSB CHILD DEVELOPMENT ACCOUNT (CDA) FORM FOR INTERBANK GIRO

### PART 1: FOR APPLICANT'S COMPLETION (fill in the spaces indicated with a ✓)

Date: _____ ✓ _____ To: Name of Bank: <b>DBS Bank Ltd</b> Branch: ✓ _____ Name of Child (as in CDA): ✓ _____ Child's Birth Certificate Number: ✓ _____	Child Development Account (CDA) Number: ✓ _____ Name of Approved Institution (AI): ✓ <b>NEWTON KINDERGARTEN</b> Trustee's Name: ✓ _____ Trustee's Home/Office/Mobile Number(s): ✓ _____ Trustee's Signature/Date : _____ (as in bank's records) For thumbprint, please verify with DBS/POSB branch before submitting to AI.
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- (a) I hereby instruct you to process the Approved Institution's instructions to debit my Child Development Account (CDA).  
 (b) You are entitled to reject the Approved Institution's instruction if my CDA does not have sufficient funds and charge me a fee for this.  
 (c) This authorisation will remain in force until terminated by your written notice sent to my address last known to you or upon receipt of my written revocation through the Approved Institution.

### PART 2: FOR APPROVED INSTITUTION'S COMPLETION

Bank	Branch	Approved Institution's Account Number	Approved Institution's Reference Number
7339	591	455902001	

  

Bank	Branch	CDA Account Number To Be Debited

### PART 3: FOR BANK'S COMPLETION

To: Approved Institution

This Application is hereby REJECTED (please tick) for the following reason(s):

- |  |  |
|--|--|
| <input type="checkbox"/> Signature/Thumbprint <sup>#</sup> differs from Bank's records     | <input type="checkbox"/> Wrong account number                        |
| <input type="checkbox"/> Signature/Thumbprint <sup>#</sup> incomplete/unclear <sup>#</sup> | <input type="checkbox"/> Amendments not countersigned by customer/BO |
| <input type="checkbox"/> Account operated by signature/thumbprint <sup>#</sup>             | <input type="checkbox"/> Other reason(s): _____                      |

\_\_\_\_\_  
Name of Approving Officer

\_\_\_\_\_  
Authorised Signature

\_\_\_\_\_  
Date

\* For thumbprints, please go to the branch with your identification.

<sup>#</sup> Please delete where inapplicable



纽顿幼稚园

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**CHILD DEVELOPMENT ACCOUNT AUTHORIZATION FORM (CDA)**

**AUTHORIZATION FOR USING CDA FUNDS TO PAY SCHOOL FEES**

**1. Student's Particulars**

Name of Child : \_\_\_\_\_ Class / Level : \_\_\_\_\_  
Birth Certificate No : \_\_\_\_\_ Birth Order: 1 / 2 / 3 / 4  
Citizenship : Singaporean / Permanent Resident Sex : M / F

**2. Trustee's Particulars**

Name of Parent : \_\_\_\_\_ Contact No: \_\_\_\_\_  
NRIC No : \_\_\_\_\_ Citizenship: Singaporean / Permanent Resident

**3. CDA Details**

CDA belongs to the Student / Sibling

CDA No : \_\_\_\_\_ Bank: \_\_\_\_\_

**4. Use of Sibling's Account**

Sibling's Name : \_\_\_\_\_ Class / Level : \_\_\_\_\_  
Birth Certificate No : \_\_\_\_\_ Birth Order: 1 / 2 / 3 / 4  
Citizenship : Singaporean / Permanent Resident Sex : M / F  
(Please attach a copy of child's birth certificate if child is not a registered student in the kindergarten)

**5. Authorization**

I, (Name of Trustee) \_\_\_\_\_ of (NRIC No) \_\_\_\_\_  
hereby authorize Newton Kindergarten to make deduction from my child's CDA in settlement of (Name of Student)  
\_\_\_\_\_ fees.

I am fully aware that the deduction of CDA will take effect upon approval by the bank and I am also aware that should my child's CDA have insufficient funds, I will need to pay the full amount in cash / cheque.

\_\_\_\_\_  
Name of Trustee

\_\_\_\_\_  
Signature of Trustee

\_\_\_\_\_  
Date